



STATE OF SOUTH CAROLINA

Caption of Case)

Example: Application for a Class C Charter Certificate from  
John Doe dba Doe's Limo

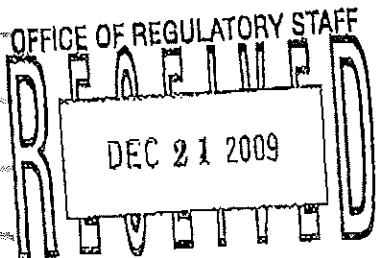
COPY

Posted: led

Dept: S.A.

Date: 12/31/09

Time: 2:45



BEFORE THE  
PUBLIC SERVICE COMMISSION  
OF SOUTH CAROLINA

220952

TRANSPORTATION COVER SHEET

DOCKET

NUMBER: 1998-615-T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: JR Services, Inc.

Address: 209 Northside Way  
Greenville, SC 29617

Telephone: 864-834-4222

Fax: 864-834-8072

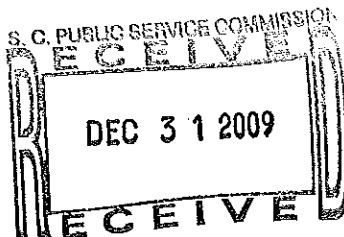
Other: \_\_\_\_\_

Email: info@jytransportation.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

- |   |  |
|---|--|
| <input type="checkbox"/> Application - Class C Taxi   | <input type="checkbox"/> Request to Amend Scope of Authority           |
| <input type="checkbox"/> Application - Class C Charter  | <input type="checkbox"/> Request to Amend Tariff (rate increase, etc.) |
| <input type="checkbox"/> Application - Class C Charter Bus  | <input type="checkbox"/> Request to Amend Passenger Limit              |
| <input type="checkbox"/> Application - Class C Non-Emergency  | <input type="checkbox"/> Request                                       |
| <input type="checkbox"/> Application - Class E Household Goods  | <input type="checkbox"/> Exhibit                                       |
| <input type="checkbox"/> Application - Class E Hazardous Waste  | <input type="checkbox"/> Late-Filed Exhibit                            |
| <input type="checkbox"/> Application  | <input type="checkbox"/> Letter  |
| <input type="checkbox"/> Request for Extension to Comply with Order   | <input type="checkbox"/> Proposed Order                                |
| <input type="checkbox"/> Request for Order Granting Authority to Obtain Certificate of Public Convenience and Necessity to Be Rescinded | <input type="checkbox"/> Publisher's Affidavit                         |
| <input checked="" type="checkbox"/> Request for Cancellation of Certificate   | <input type="checkbox"/> Reservation Letter                            |
| <input type="checkbox"/> Request for Suspension   | <input type="checkbox"/> Response                                      |
| <input type="checkbox"/> Request for Reinstatement  | <input type="checkbox"/> Return to Petition                            |
| <input type="checkbox"/> Request for Name Change on Certificate   | <input type="checkbox"/> Other:  |



Request for Cancellation of Certificate

File the original with:	Mail or fax a copy to:
Public Service Commission of South Carolina Docketing Department Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 - 5100 FAX (803) 896-5199	S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815

DATE: 12-17-09

Please consider this a request to cancel my:

- ☒ Class C Taxi Certificate      ☐ Class A Restricted Certificate
- ☐ Class C Charter Certificate
- ☐ Class C Charter Bus Certificate
- ☐ Non-Emergency Certificate
- ☐ Class E Household Goods Certificate
- ☐ Class E Hazardous Wastes Certificate

RECEIVED  
DEC 21 2009  
ORS  
T,T,W,W,M

My Certificate Number is 6694-A

JR Services, Inc. DBA \_\_\_\_\_  
(Name of Company) (If applicable)

209 Northlife way \_\_\_\_\_  
(Street Address) (Mailing Address if different from Street Address)

Greenville, SC 29617 \_\_\_\_\_  
(City, State, Zip Code) (City, State, Zip Code)

804-834-4000  
(Telephone Number)

Jerry Pastore  
(Signature)  
Office manager  
(Title)

